

Standard Form No. 1934-Revised

Standard FORM NO. 1031 Rev.
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

PUBLIC VOUCHER FOR PURCHASES ID:
ed FOR Release 2001/08/15 : CIA-RDP64-003
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. -----

R000600040199-3
Bu. Ven. No. 2389

U. S. _____ **COST REIMBURSABLE**
(Department, bureau, or establishment)

Voucher prepared at _____ (Give place and date)

THE UNITED STATES, Dr., *Payee's Account No.* _____

To _____ (Payee)

PAID BY

End #12
DDP-1226-59
COPY 1 OF 2

(Address)		(City)	(State)	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)			QUANTITY	UNIT PRICE		AMOUNT	
No. and Date of Order	Date of Delivery or Service			Discount Terms				Cost	Per	Dollars	Cts.
		Costs							\$10,986	.15	
PAYMENT:											
Complete	<input type="checkbox"/>										
Partial	<input type="checkbox"/>										
Final	<input type="checkbox"/>										
Use continuation sheet(s) if necessary											
Shipped from	to	Weight	Government B/L No.	Total	\$10,986	.15					
I certify that the above bill is correct and just and that payment has not been received.							(Payee must NOT use this space)				
STATINTL							Differences _____				
(Sign original only)											
Date 2-3-59 *Payee							Amount verified; correct for _____				
Per [REDACTED]							(Signature or initials) EL				
Title _____											
Required when a like certificate is made by payee on attached bill or bills)											
Date _____ Reg. No. _____							Invoice Rec'd. _____				

I understand that the site created in me. I certify that this account is correct and proper for payment.

† Approved for §

Title

Date

ALL PURCHASES AND PURCHASED SERVICES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM.

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19_____, for \$_____ on Treasurer of the United States in favor of
payee named above.
C. I. & _____ on _____ 19_____ Payee _____

* When a voucher is signed or reciepted in the name of a company or corporation, the name of the person writing the company or corporate name on the voucher is to be typed here. For example: APPROVED FOR RELEASE 2001/08/15 CIA RDP64-00360R000600040199-3

Title _____ 16-22900-6
If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$".

essary; otherwise the approving officer will sign on the line below "Approved for \$-----, and
over his official title. 16-22900-6

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STATOTHR

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DATE _____
1/24/59

1 / 24 / 59

ACCOUNTS PAYABLE

THE BAMO-WOOLDRIDGE CORPORATION

FORM STL - 660

THE BAMO-WOOLDRIDGE CORPORATION

1 / 24 / 39

WEEKLY REGISTER

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THE BIMO WOODBRIDGE CORPORATION

ACCOUNTS PAYABLE

DATE 1/24/59

1 / 24 / 59

DATE

ENVIRONMENTAL

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THE BIMOWOOL BRIDGE CORPORATION

ACCOUNTS PAYABLE

DATE 1/24/59

ESTATE PLANNING

1 / 24 / 59

THE RAMO-WOOLDRIDGE CORPORATION

1/24/59

ACCOUNTS PAYABLE

DATE

WEEKLY DISTR

FORM STL - 660

No.	Mo.	Day	Yr.	INVOICE		PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE	Vendor Number	GROSS AMOUNT	DISCOUNT	CHARGE DISTRIBUTION				NET AMOUNT
				BATCH	NUMBER							COST Center	Code	M.J.O.	S.O.	
49	01	23	9	935930	45159	C1	21	264				00	12501	3093	25	725
				92592	45159	C1	29	264				00	12501	3093	25	640
71	01	23	9	94236	45158	C1	29	264				00	12501	3093	25	480
				94238	45158	C1	29	264				00	12501	3093	25	480
71	01	23	9	94435	45158	C1	29	264				00	12501	3093	25	360
				101676	45158	C1	29	264				00	12501	3093	25	120
71	01	23	9	DRC354	45158	C1	29	264				00	12501	3093	25	600
				DRC357	45158	C1	29	264				00	12501	3093	25	2040
71	01	23	9													2040*

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THE BIMOWO WOODGE CORPORATION

ACCOUNTS PAYABLE

ESTATE PLANNING

DATE 1/24/59

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THE RAMO-WOOLDRIDGE CORPORATION

THE RAMO-WOODRIDGE CORPORATION

THE RAMO-W

ACCOUNTS PAYABLE

DATE 1/24/59

WEEKLY DISTR

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